

To  
The Chairman,  
Utkal Grameen Bank,  
Head Office, Bolangir-767001

Affix joint Photograph with  
spouse duly attested by  
Branch Manager

(Single Photo for  
widower/widow applicants)

Dear Sir,

**APPLICATION FOR PENSION/FAMILY PENSION /COMPASSIONATE ALLOWANCE**

I furnish hereunder all required information / documents and request you for release of my Pension/  
Family Pension in terms of Utkal Grameen Bank (Employees') Pension Regulations, 2018.

1	Full Name of Staff in Capital Letter				
2	Cadre/Grade		3	Dt. of Birth	
4	PF A/C No.	OR/1560/	5	UAN No	
6	PAN No(.#)		7	Aadhaar No (#)	
8	Mobile No		9	Email ID(if any)	

(# Self attested Photocopies of PAN & Aadhar to be submitted)

**Additional Information for Claimant of Family Pension:**

10	Name of Claimant				
11	Relation with the Deceased Staff		12	Dt. of Birth	
13	Monthly Income(Rs)		14	Mobile No.	

15	(a) Date of Joining in Bank's service.	
	(b) Date of Retirement from Bank's service.	
	(c) Date of Death (in case of deceased)	
16	Type of Exit. (Superannuation / Death )	
17	Name of Branch / Office, where retired/expired.	
18	Period of Suspension, if any, during the service career in the Bank.	
19	Period of Break in Service (if any), due to EOL/ Suspension/ Punishment etc.	
20	Full Postal Present address with PIN for communication	

21	If, opting for commutation, specify the fraction of Pension to be commuted.			
22	(i)	Name of the <b>Pension Servicing Branch</b> of Utkal Grameen Bank, opted for	Br Code	
	(ii)	Savings Bank Account Number opened jointly with Spouse.		

23	Declaration Regarding Submission of Authorisation Letters in terms of Staff Cir.01 of 2019			
(a)	Date of Submission of <b>Format-1</b> for staff retired/ deceased after 24/12/2018		At Branch	
(b)	Date of Submission of <b>Format-2</b> for staff retired between 01/04/2018 and 23/12/2018		At Branch	
(c)	Date of Submission of <b>Format-3</b> for by family for staff deceased after 01/04/2018		At Branch	

24 I furnish hereunder details of the family members in the order of preference to receive Family Pension in the event of my death and undertake to notify Bank then and there in case of any addition or alteration in it.

Sl.	Name of the member of the family (as defined in UGB (Employees') Pension Regulations, 2018)	Date of Birth	Relationship with the employee	Remarks
(a)				
(b)				
(c)				
(d)				
(e)				

25 I hereby nominate the person named below to receive commuted value of Pension / Arrears in case of my death.

(a)	Name and Address of the Nominee	
(b)	Relationship with the Employee	
(c)	Date of Birth of the Nominee	

26 **Details of PF & Pension Withdrawal from EPFO: (\* - Mandatory)**

(A)-i	Amt of Final PF withdrawal (*)		ii	Date of Final Withdrawal. (*)	
iii	Amt of Employer's Contribution out of (a)		iv	Amt Credited to A/c No.	
v	Amt of Non refundable Advance from Employers' share, (if any)	1. 2. 3.	vi	Date of Advance	1. 2. 3.
(B)-i	Amt of EPFO Pension		ii	Date of Commencement of EPFO Pension	

iii	Whether commuted. if so, give details				
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The information furnished above are true and correct to the best of my knowledge and belief.

I enclose herewith the following tick (√) marked papers/ documents/ particulars for your reference.

**A-Enclosures For Pension Application by Retired Pensioner:**

1	Format-2 (Staff Cir.01 of 2019) if Format-1 submitted previously	
2	Two copies of recent passport size joint photograph with spouse without attestation. (Single Photographs in case of Widower/widow applicant)	
3	Specimen signature and personal identification mark form <b>(Form-1-A)</b> duly attested by the Branch Manager of the Pension Servicing Branch .	
4	Life Certificate & Non Employment Certificate for Retirement Pensioner (Format- 6 & 7 of Staff Cir No-01 of 2019)	
5	Undertaking letter in <b>Form-1-B</b> regarding Loans outstanding	
6	Undertaking letter in <b>Form-1-C</b> regarding provisional Refund of Employer's contribution	
7	Copy of Format-9 & Format-11 (Staff Cir.01 of 2019)	
8	Certificate on Last 10 Month's Pay & Liabilities <b>(Form-1-F)</b> from the <b>Last Branch/ Office served</b>	
9	Copy of Member Passbook downloaded from EPFO website <b>AFTER</b> final withdrawal of PF	
10	Copy of Bank Passbook page/Statement showing the credit of final withdrawal amt of PF	
11	Copy of Bank Passbook Page/Statement showing credit of latest EPFO Pension Amt.	
12	Self Attested Photocopies of PAN, Aadhaar & Bank A/c for pension	
13	Application of Commutation of pension (FORM VI / VII & VIII) affixing recent passport size single photo duly attested by the Branch Manager of the Branch having pension account.	

**B-Enclosures for Family Pension Application for Deceased Staff:**

1	Format-3 (Staff Cir.01 of 2019) if Format-1 submitted by employee by previously	
2	Format-12 (Staff Cir.01 of 2019)	
3	Copy of Death Certificate & Legal Heir Certificate Duly verified by the BM	
4	Two copies of recent passport size photograph without attestation.	
5	Specimen signature and personal identification mark form <b>(Form-1-A)</b> duly attested by the Branch Manager of the Pension Servicing Branch	
6	Life Certificate & Non Re Marriage Certificate for Family Pensioner (Format-6 & 8 of Staff Cir No-01 of 2019)	
7	Undertaking letter in Form-1-D regarding Loans outstanding	
8	Undertaking letter in Form-1-E regarding provisional Refund of Employer's contribution	
9	Certificate on Last 10 Month's Pay & Liabilities <b>(Form-1-F)</b> from the <b>Last Branch/ Office served</b>	
10	Copy of Member Passbook downloaded from EPFO website AFTER final withdrawal of PF	
11	Copy of Bank Passbook page/Statement showing the credit of final withdrawal amt of PF	
12	Copy of Bank Passbook Page/Statement showing credit of latest EPFO Pension Amt.	
13	Self Attested Aadhaar Card, PAN (Optional) & Bank A/c for Pension	

(Listed above are the papers normally required for pension settlement.)

I undertake that if some additional papers are required by the Bank specifically for my case, the same will be submitted.

Place..... Signature of the Employee/ Claimant for Family Pension  
 Date..... Name of the Employee/Claimant.....  
 Address:

UTKAL GRAMEEN BANK (EMPLOYEES') PENSION REGULATIONS, 2018

Specimen Signature of Shri / Smt. \_\_\_\_\_

Signature: 1.

2.

3.

Specimen signature attested by:

Branch Manager,  
Pension Servicing Branch with seal.

Name:  
PF No. OR/1560  
Designation:  
Branch / Office:

UTKAL GRAMEEN BANK (EMPLOYEES') PENSION REGULATIONS, 2018

Personal Identification Marks of Shri / Smt. \_\_\_\_\_

Height : \_\_\_\_\_ cms or \_\_\_\_\_ inches

Personal identification marks : 1) \_\_\_\_\_

2) \_\_\_\_\_

Branch Manager,  
Pension Servicing Branch with seal (Attesting Officer):

Name:  
PF No. OR/1560  
Designation:  
Branch / Office:

To  
The Chairman,  
Utkal Grameen Bank,  
Head Office,  
Bolangir -767001.

Dear Sir,

UNDERTAKING LETTER FOR FAMILY MEMBERS OF DECEASED EMPLOYEES

I, ..... eligible family member of  
late.....PF No.OR/1560/.....  
Cadre/Grade..... expired on dt.....  
at.....Branch / Office hereby authorize Utkal  
Grameen Bank to deposit the proceeds of my PF / Pension / Pension Commutation / Pension  
Arrear, if any, to my Pension SB Account No. ....  
with ..... Branch of Utkal Grameen Bank.

The deceased staff member has the following staff loan accounts in his / her name /  
singly/jointly with ..... relationship .....  
or any other loans in which the sanction stipulates that the remaining amount at the time of  
cessation of service to be recovered / closed from the superannuation / terminal benefits:

Sl.	Loan Account No	Loan Type	Branch
1			
2			
3			
4			
5			

(\* Please provide annexure in the above format, if number of loans exceeds the above table)

I hereby irrevocably authorize Utkal Grameen Bank to debit my above mentioned account and  
close the above furnished loan accounts / recover other dues to be payable by me on account  
of Bank's share in EPF and the fine / penalty imposed by the Disciplinary Authority, if any.

Yours faithfully,

Date:  
Place:

Signature

Address: (Name.....)

To  
The Chairman,  
Utkal Grameen Bank.  
Head Office,  
Bolangir-767001.

Dear Sir,

**UNDERTAKING LETTER BY FAMILY MEMBER OF DECEASED EMPLOYEE FOR REFUND OF BANK'S SHARE IN EPF**

I, .....eligible family member of  
Late.....PF No.OR/1560/.....  
Cadre/Grade ..... expired on dt.....(after superannuation on  
dt.....) from ..... Branch / Office have effected Final withdrawal of  
PF balance of Late..... from EPFO amounting to  
Rs...../- which was credited to my a/c no.....  
with .....Bank on dt.....

I declare that as per my knowledge Late..... have never made any non-refundable  
withdrawal from the Employer's share of his PF a/c in any time during his service period / have effected  
withdrawals from the Employer's share of his PF a/c as declared in Para No 26 of Form-1.

As per my authorization given in Format-3, to be eligible for pension under the provisions of UGB  
( Employees' ) Pension Regulations,2018, I will refund the employer's contributions to PF for  
Late.....withdrawn along with the non-refundable withdrawals made from  
the employer's share with interest upto the date of final withdrawal to the Bank. In this connection, I  
undertake to deposit the amount demanded by the Bank as the amount of Employer's contribution to  
EPFO in respect of Late....., arrived provisionally basing on the length of  
Late..... service in the Bank, pending receipt of information from EPFO towards  
the exact refundable amount. I further undertake that I will arrange to deposit the amount to the account  
prescribed by the Bank within 30 days of the date of the Demand Letter.

I also undertake to refund the differential amount, over and above the amount deposited by me, if any,  
towards refund of Bank's share in EPF as and when Bank intimate me the amount on the receipt of  
information from EPFO towards the exact refundable amount in respect of  
Late..... In the event of my failure to do so, I hereby irrevocably authorize Utkal  
Grameen Bank to recover said differential amount from the pension payable to me.

Date:

Place:

Signature

Address:

(Name.....)

(To be provided by the branch/office worked last)

The General Manager-III,  
Utkal Grameen Bank,  
Head Office, Bolangir.

Letter No \_\_\_\_\_

Date: \_\_\_\_\_

Dear Sir,

**Particulars of Pay & Liabilities of Shri/Smt /Late** \_\_\_\_\_  
**Grade** \_\_\_\_\_ **PF Id** \_\_\_\_\_  
**Retired /Expired on** \_\_\_\_\_

We are furnishing below the particulars of Pay & Outstanding Liabilities of the captioned employee.

A) **Particulars of Pay:** (last 10 months prior to retirement /death)

Sl	For the Month	Basic Pay with Stagnation Increment	Spl Pay (JAIIB/ CAIIB-I/II)	Spl Pay (Graduate Pay)	Spl Pay (SWO-A/B)	Spl Pay (Driver/ Duftery)	Total Pay
		(a)	(b)	(c)	(d)	(e)	(a+b+c+d+e)
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
	<b>Total</b>						
	<b>Average</b>						

**(B) Particulars of Outstanding Loans & Liabilities:**

Particulars of Outstanding Loan	Account No	Balance on date
1. House Building Loan		
2. Housing Loan (Commercial Scheme)		
3. Staff Over Draft		
4. Festival Advance		
5. Education Loan		
6. Conveyance Loan		
7. Others, if any ( <i>Mention details</i> )		
<b>TOTAL LOAN BALANCE</b>		

(Additional Sheet May be added if space insufficient)

Signature of Branch Manager with seal

Branch.....



**FORMAT - 3**  
**UTKAL GRAMEEN BANK**  
**Head Office: BOLANGIR-767001(ODISHA)**

***Option Form to be filled in by the family of those employees of the Bank who are eligible for family pension (To be submitted in quadruplicate through the Branch / Office from where retired/posted at the time of death)***

Date of receipt of application at Branch / Office	Recent photograph of the applicant to be pasted here and then to be attested by the Branch /Office Head	<b>FOR HO USE ONLY</b>
Forwarded on:		<b>OPTION NOTED IN SERVICE RECORD / EPF RECORD OF THE DECEASED EMPLOYEE</b>
Forwarded by:		
Signature with office seal (Branch/Office)		<b>(Signature of the concerned Authority at HO with date)</b>

The Chairman  
Utkal Grameen Bank  
Head Office: Bolangir\_

Date: \_\_\_\_\_

I hereby declare that I have read and understood the Utkal Grameen Bank (Employees') Pension Regulations, 2018 and I hereby voluntarily opt to become a member of the Bank's Pension Scheme and irrevocably authorize the EPFO / RPFCL to transfer my entire Pension Fund kept with them to Bank to credit Pension Fund to be created for this purpose. I undertake to refund the Bank's contribution to EPF Fund together with accrued interest thereon paid to my husband/wife/father/mother/son/daughter (delete whichever is not applicable) on his/her death while in service/after retirement from Bank's service. I also undertake to refund the non-refundable withdrawal from EPF balance (Bank's contribution component) availed by my husband/wife/father/mother/son/daughter (delete whichever is not applicable), if any, together with interest at EPF rate from time to time up to the date of retirement / death.

1. Name of the applicant/dependent of deceased employee

in Full (in Block letters): \_\_\_\_\_

2. Name of the deceased employee in Full (in block letter): \_\_\_\_\_

3. EPF No of the deceased employee: \_\_\_\_\_

4. Relationship with the deceased employee; \_\_\_\_\_

5. Name of guardian if applicant is minor; \_\_\_\_\_

**Contd....Page-2**



**FORMAT – 3 (PAGE – 2)**

6. Present Residential Address (in block letter): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Date of death of the deceased employee (Documentary evidence to be attached): \_\_\_\_\_

8. Date of retirement from Bank's service: \_\_\_\_\_

9. Branch /Office last served and post held \_\_\_\_\_

10. Branch from where pension to be drawn: \_\_\_\_\_ Branch

11. List of documents / evidences to be attached:

- a) Copy of Superannuation / retirement order of the deceased employee (If applicable)
- b) Copy of Death Certificate of the Employee
- c) Copy of Birth certificate of child eligible for pension
- d) Copy of AADHAAR CARD/ KYC document in the name of applicant
- e) Any document in support of the stated relation of the applicant

(Mention the name / nature of document)

I hereby declare that what are stated in the application and documents submitted are true, correct and genuine.

Enclosures: As stated in point 11 above.

(Signature of the applicant)

Date: \_\_\_\_\_

Place: \_\_\_\_\_

**Signature attested by the Branch/Office Head with Office Seal**



**FORMAT - 6**

..... <b>STAFF PENSION*</b> <b>(GENERAL PENSION)</b>		<b>Customer ID</b>	
..... <b>FAMILY PENSION*</b>		<b>S B A/C No</b>	

(\*Please /as applicable)

**LIFE CERTIFICATE**

***(To be submitted by the Pensioner at the time of application & once in a year in November every year)***

Certified that I have seen the pensioner ..... (name)  
 .....  
 .....(address) holder of UGB PPO No..... and that he /she is alive on  
 this day. His / Her AADHAAR No .....

(Signature of the Pensioner/Family Pensioner with date)

(Signature with office seal)

Date:.....

Name:.....

Place:.....

Designation:.....Branch: UGB,,... ..

Note: To be signed by the Pensioner / Family Pensioner in the presence of the Attesting BM of the Pension Servicing



**FORMAT - 8**

**CERTIFICATE OF NON- REMARRIAGE / NON-MARRIAGE**  
**(APPLICABLE FOR FAMILY PENSIONERS ONLY)**

\* I hereby declare that I have not got re-married and I undertake to report the same promptly in the event of my re-marriage. (Applicable for widow / widower Family Pensioner)

\* I hereby declare that I am not married and I undertake to report the same promptly in the event of my marriage. (Applicable for un-married daughter Family Pensioner)

***(\*Please delete which is not applicable)***

Signature of the Family Pensioner:

Name of the pensioner: .....

Place :.....Date: .....

I certify to the best of my knowledge and belief the above statement is correct.

(Signature of the Bank's Officer or respectable /well known person)

Place : .....

Date : .....

Name : .....

Designation: .....

Address: .....



**FORMAT –10**

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**Letter of undertaking by the Pensioner and Family Members / Nominees**

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**The Branch Manager**

.....**Branch**

.....**Bank**

Date: \_\_\_\_\_

Dear Sir,

**Sub: Payment of Pension under PPO No. \_\_\_\_\_ through your Branch**

In consideration of making payment of Pension as per the Utkal Grameen Bank Pension Regulations 2018, I / We do hereby solemnly, sincerely and conscientiously declare and say as under

I / We, hereby undertake and agree to bind myself / ourselves and my / our heirs, successors, executors, and administrators to indemnify the Bank from and against any loss suffered or incurred by the Bank in making payment as aforesaid and to forthwith pay the same to the Bank and / or adjust from the pension fund under the aforesaid Regulations and / or from any account maintained with the Bank without any notice to me/ us.

Yours faithfully,

Signature (Pensioner) ; \_\_\_\_\_

Signature of Family Members / Nominees: \_\_\_\_\_

Witness	(I)	(II)
Signature		
Name		
E.P.F No		
Address		



## FORMAT - 11

### FORM OF NOMINATION

To  
THE TRUSTEES, UTKAL GRAMEEN BANK (EMPLOYEES'S) PENSION FUND

I, \_\_\_\_\_ PPO No/ EPF No \_\_\_\_\_ hereby nominate the person(s) named below and confer on him / them the right to receive , to the extent specified below , the amount of pensionary benefits under the Pension Regulations in the event of my death before the amount become payable, or having become payable, has not been paid.

Name and address of the Nominee(s)	Relationship with the pensioner	Age	Amount of share (%)		Date of Birth	IF NOMINEE IS MINOR
			(3)	(4)		Name & address of the person who may receive the said pension during the nominee's minority
(1)	(2)		(3)	(4)	(5)	(6)

Name and address of other Nominee(s) in case the nominee under column 1 above predeceases the pensioner	Age	Relationship with the pensioner	Amount of share (%)	Date of Birth ,if the other nominee(s) is/are minor	Name & address of the person who may receive the pension during other nominee's minority	Contingency on happening of which nomination shall become invalid
(7)	(8)	(9)	(10)	(11)	(12)	(13)

This nomination supersedes the nomination made on \_\_\_\_\_ which stand cancelled.

Place: \_\_\_\_\_

Signature / Thumb Impression (if illiterate) of Pensioner/Employee

Date: \_\_\_\_\_

Name of Pensioner/Employee : \_\_\_\_\_

**WITNESS** :1. \_\_\_\_\_ 2. \_\_\_\_\_

Address : \_\_\_\_\_ Address : \_\_\_\_\_

Signature  
EPF No \_\_\_\_\_

Signature  
EPF No \_\_\_\_\_

**ATTESTED** by the Pension Disbursing Branch/ Deptt. at H O / Branch

**SEAL OF ATTESTING AUTHORITY**

**NOTE:1.** If the employee has a family, the nomination shall not be in favour of any person or persons other than the members of the family. **2.** If the employee has no family, the nomination may be made in favour of person or persons, or a body of individuals whether incorporated or not.. **3.** Strike out which is not applicable.



**FORMAT – 12**  
**UTKAL GRAMEEN BANK**

**Head Office: BOLANGIR (CLUB PADA) , P.O. BOLANGIR , Dist. BOLANGIR**

**Application for grant of Family Pension in the event of death of Employee / Pensioner**



The Chairman  
Utkal Grameen Bank,  
Head Office: Bolangir.

Date: \_\_\_\_\_

Dear Sir,

I hereby declare that as an eligible family member to receive Family Pension in terms of Utkal Grameen Bank (Employees') Pension Regulations, 2018, I am submitting below the requisite particulars for kind favour of sanction of Family Pension to me.

1. Name of the applicant (in block letters) : \_\_\_\_\_

i) . Relation with the deceased employee/pensioner: \_\_\_\_\_

ii) . Date of Birth : \_\_\_\_\_

iii) . Name of the Guardian if the deceased Person is survived by minor child/children \_\_\_\_\_

iv) . Religion and Caste : \_\_\_\_\_

02. Present residential address of the applicant (in block letters) : \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Contact No \_\_\_\_\_

03. Name & age of surviving parent/widow/widower/children of the deceased employee / pensioner:

SI No	Name	Relationship with the deceased employee/pensioner	Date of Birth ( by Christian era)

04. Name of the deceased employee/pensioner \_\_\_\_\_

05. EPF No of the deceased employee : \_\_\_\_\_

06. Date of death of the employee /pensioner: \_\_\_\_\_

**(Documentary evidence to be attached) Contd. PAGE - 2**

**FORMAT – 12 (Page-2)**

07. Date of retirement (in case of Pensioner): \_\_\_\_\_

08. a) Branch/Office in which the deceased employee/  
Pensioner served last and post held by him/her \_\_\_\_\_

b) PPO No of the deceased, if any, with the nature  
of pension & Disbursing Authority. : \_\_\_\_\_

09. If the applicant is guardian, date of birth of minor  
& relationship with the deceased employee/pensioner \_\_\_\_\_

10. a) Is the applicant (other than guardian) a pensioner ? **YES / NO**

if so, indicate the amount of monthly pension : \_\_\_\_\_

b) Is the applicant employed? If so, particulars **YES / NO**  
in details with last pay drawn certificate from employer :

11. Description of the applicant including (a) Height \_\_\_\_\_cm

(b) Personal Identification marks, if any, on hand, face etc. \_\_\_\_\_

12. Signature/LTI \*\* of the applicant (Duly  
Attested by the Branch head with seal) \_\_\_\_\_

**SIGNATURE / LTI OF THE APPLICANT  
IS ATTESTED**

**(Signature of the Branch Head with Seal)**

13. a) Name of the Branch of the Bank through which  
Family Pension is to be drawn : \_\_\_\_\_

b) SB Account No : \_\_\_\_\_

14. List of Documents / evidence attached :

- a) Three copies of passport size recent photograph of the applicant , duly attested in front side
- b) Attested copy of the Death Certificate of the deceased Employee/ Pensioner
- c) Birth Certificate of the children eligible for pension.
- d) Any other document(s) indicating that the applicant is a genuine claimant e.g. AADHAAR Card, Voter Card etc.

15. I hereby declare that what are stated in this application and documents submitted herewith are true, correct and genuine.

Yours faithfully,

\_\_\_\_\_  
Signature/LTI of the applicant

**\*\* To be furnished in case the applicant is not literate enough to sign his/her name or unable to sign due to poor health condition which also needs submission of Medical Certificate.**

To  
The General Manager,  
Utkal Grameen Bank,  
Head Office, Bolangir

Sir,

I, Sri/ Smt.....  
am to inform that I have applied the Bank for pension/ family pension in respect of  
Late..... under the UGB Pension Scheme.

2- I understand that as per the UGB Pension Scheme, the amount of pension/family pension is to be reduced by the amount of monthly EPF pension/family pension. In this connection I declare that my EPF pension/family pension is yet to settled by EPFO .

3- So I request that UGB Pension may be paid to me by deducting Rs.3000/- notionally towards EPF Pension/family pension. I undertake to intimate the Bank through my Pension Serving Branch when my EPF Pension/family pension is actually settled along with the following supportive documents for refund of the excess pension/family pension deducted:

- I. Copy of PPO/Sanction Letter of EPFO
- II. Copy of Page of the Bank Passbook showing EPF Pension/Family pension credit

4. So I request the Bank to issue PPO / release monthly pension to me under UGB Pension Scheme on the basis of my above athorisation / undertaking.

Yours faithfully,

Date: (Sri/Smt.....)  
PF No.....  
(PF No. of Deceased staff in case of Family pension)

Encl: As Above